## 1300031107

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SECRETARY OF STAKE

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: Global Equities Advisors, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alexander J. Alfano

Name of Person

Firm/Company

2655 Le Jeune Road, Suite 403

Address

Coral Gables, Florida 33134

City/State and Zip Code

aalfano@lawalfano.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexander J. Alfano

<sub>.../</sub>305、450-8550

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

■\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:** 

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Global Equities Advisors,		_				
(Name of the Limited	l Liability Compa A Florida Limited I	ny as it now appears on iability Company)	our records.)	<del></del>		
The Articles of Organization for this Limited L Florida document number L13000031107	iability Company	were filed on Februa	ry 28, 2013	_ and assigned		
This amendment is submitted to amend the following	owing:					
A. If amending name, enter the new name of	of the limited liab	oility company here:				
N/A						
The new name must be distinguishable and end w "L.L.C."	th the words "Lim	ited Liability Company,"	the designation "LLC"	C" or the abbreviat	ion	
Enter new principal offices address, if applicable:		N/A			_	
(Principal office address MUST BE A STREE	ET ADDRESS)					
			<u> </u>	当 S	_	
			بحر 1000 عند			
Enter new mailing address, if applicable:		N/A	<u>س</u>	8 0	_	
(Mailing address MAY BE A POST OFFICE BOX)					_	
				S F O	••	
				福 22		
B. If amending the registered agent and registered agent and/or the new registered of			ecords, <u>enter the</u>	name of the n	ew -	
	and water out the	<u>-</u> '				
Name of New Registered Agent:	N/A		<del>, , , , , , , , , , , , , , , , , ,</del>		_	
New Registered Office Address:	N/A					
		Enter F	lorida street addre:	SS	•	
	,	, Florida				
·		City		Zip Code	-	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Haider Zafar Hashwani	2655 Le Jeune Road, Suite 403	<b>✓</b> Add
		Coral Gables, Florida 33134	
			_
<del></del> -			Add
			Remove
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D. If amending any other inform N/A	nation, enter change(s) here: (Attach additional sheets, if necessary.)
	•
ated April 2	2013
	Muen
Alexander J. A	ignature of a member or authorized representative of a member
<del></del>	Typed or printed name of signee

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Filing Fee: \$25.00